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## APPLICANTS

Samuel N Zellner, Dunwoody, GA;  
 Mark J Enzmann, Roswell, GA;  
 Robert T Moton JR., Alpharetta, GA; OA

## \*\* CONTINUING DATA \*\*\*\*\*

OA

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

OA.

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Met after Allowance Initials OA	DRAWING 5	26	3

## ADDRESS

39262  
 BELLSOUTH CORPORATION  
 P.O. BOX 2903  
 MINNEAPOLIS , MN  
 55402-0903

## TITLE

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